

**SUMMARY REPORT DIGEST-**  
**COMPLAINT REGISTER INVESTIGATION NO.:**  
**CHICAGO POLICE DEPARTMENT**

306005

DATE OF REPORT (DAY-MO.-YEAR)

27 July 2005

To be used in all cases that are to be classified as either EXONERATED, UNFOUNDED, NOT SUSTAINED or  
 in SUSTAINED cases where the Disciplinary Recommendation does not exceed FIVE (5) DAYS SUSPENSION.

SUBMIT ORIGINAL AND 3 COPIES IF ASSIGNED TO SAME UNIT AS ACCUSED.  
 SUBMIT ORIGINAL AND 4 COPIES IF NOT ASSIGNED TO SAME UNIT AS ACCUSED.

TO: **SUPERINTENDENT OF POLICE**  
 ATTENTION  **ADMINISTRATOR IN CHARGE, OFFICE OF PROFESSIONAL STANDARDS**  
 **ASSISTANT DEPUTY SUPERINTENDENT, INTERNAL AFFAIRS DIVISION**

FROM-INVESTIGATOR'S NAME Lisa Mann			RANK Sgt.	STAR NO. 1717	SOCIAL SEC. NO.	EMPLOYEE NO. [REDACTED]	UNIT ASSIGN. 214
ADDRESS OF INCIDENT 200 S. Pulaski			DATE OF INCIDENT -TIME 01 June 2005 1939			BEAT OF INCIDENT	LOCATION CODE*
ACCUSED	NAME 1. Shawn Lamb	RANK P.O.	STAR NO. 16421	SOCIAL SEC. NO.	EMPLOYEE NO. [REDACTED]	UNIT ASSIGN. 214	
	2. Aaron Cunningham	P.O.	15522			214	
	SEX/RACE 1. M/W	D.O.B. [REDACTED] 1974	DATE OF APPOINTMENT 25 Aug 2003	DUTY STATUS (TIME OF INCIDENT) <input checked="" type="checkbox"/> ON DUTY <input type="checkbox"/> OFF DUTY		<input checked="" type="checkbox"/> SWORN <input type="checkbox"/> CIVILIAN	PHYS. COND. CODE# 01
	2. M/W	[REDACTED] 1967	29 Jun 1998	<input checked="" type="checkbox"/> ON DUTY <input type="checkbox"/> OFF DUTY		<input checked="" type="checkbox"/> SWORN <input type="checkbox"/> CIVILIAN	01
IF APPLICABLE - DATE ARRESTED/INDICTED 1. 2.			CHARGES		COURT BRANCH	DISPOSITION & DATE	
COMPLAINANTS	NAME [REDACTED]	ADDRESS** [REDACTED]	CITY STATE [REDACTED]	TELEPHONE [REDACTED]	SEX/RACE M/B	D.O.B./AGE [REDACTED] 1971	PHYS. COND. CODE# 01
VICTIMS	NAME [REDACTED]	ADDRESS** [REDACTED]	CITY STATE [REDACTED]	TELEPHONE [REDACTED]	SEX/RACE [REDACTED]	D.O.B./AGE [REDACTED]	PHYS. COND. CODE# [REDACTED]
WITNESSES	NAME [REDACTED]	ADDRESS** [REDACTED]	CITY STATE [REDACTED]	TELEPHONE Unknown	SEX/RACE M/B	D.O.B./AGE [REDACTED] 1973	PHYS. COND. CODE# 01

SEE ATTACHED SHEET FOR ADDITIONAL ACCUSED, COMPLAINANTS, VICTIMS, WITNESSES.

ALLEGATIONS	The complainant alleges two male white uniformed officers one with the possible name of "Lamb" stopped and detained him without justification. The complainant alleges that the officers refused to give their names upon request.						

**I.A.D. LOCATION CODES\***

- 01 Food Sales/Restaurant
- 02 Tavern/Liquor Store
- 03 Other Business Establishment
- 04 Police Building
- 05 Lockup Facility
- 06 Police Maintenance Facility
- 07 CPD Automotive Pound Facility
- 08 Other Police Property
- 09 Police Communications System
- 10 Court Room

- 11 Public Transportation Veh./Facility
- 12 Park District Property
- 13 Airport
- 14 Public Property Other
- 15 Other Private Premise
- 16 Expressway/Interstate System
- 17 Public Way - Other
- 18 Waterway, Incl. Park District
- 19 Private Residence

**I.A.D. PHYSICAL CONDITION CODES†**

- 01 No Visible Injury - Apparently Normal
- 02 No Visible Injury - Under Influence
- 03 Injured, Not Hospitalized
- 04 Injured, Not Hospitalized - Under Influence
- 05 Injured, Hospitalized
- 06 Injured, Hospitalized - Under Influence
- 07 Injured, Refused Medical Aid
- 08 Injured, Refused Medical Aid - Under Influence
- 09 Deceased
- 10 Deceased - Under Influence

\* \* IF CPD MEMBER, LIST RANK, STAR, SOCIAL SECURITY, EMPLOYEE NOS. IN ADDRESS BOX, PAX/BELL IN TELEPHONE BOX.

<p><b>SUMMARY</b></p> <p>Briefly summarize the investigation describing your efforts to prove or disprove the allegation(s). Indicate whether witnesses or evidence support or do not support the allegation(s).</p> <p>In sustained cases ONLY, copies of the accused member's Summary of Previous Disciplinary Actions and Record of Previous Complimentary History will be included as attachments.</p> <p>R/Sgt. made several attempts to contact the complainant telephonically, all were unsuccessful. R/Sgt. sent out the "letter to complainant" and never received a response. Due to the unavailability of the complainant, R/Sgt. was unable to obtain a "Sworn Affidavit" therefore, the allegations are unfounded.</p>				
<b>ATTACHMENTS</b>	INVESTIGATIVE REPORTS-SUPPORTING ALLEGATION LIST ATTACHMENT NUMBERS:  0	INVESTIGATIVE REPORTS-SUPPORTING ACCUSED MEMBER(S) LIST ATTACHMENT NUMBERS:  8 & 9	PHYSICAL EVIDENCE LIST ATTACHMENT NUMBERS:  8 & 9	TOTAL NUMBER OF ATTACHMENTS SUBMITTED WITH THIS FILE:  10
<b>FINDINGS-RECOMMENDATIONS</b>	<p>Summarize the findings and recommendations. Rule violations will be cited by number only. One overall recommendation for Disciplinary Action will be made by the investigator. The recommendation will be for ALL sustained findings; recommendations will NOT be made for each sustained allegation.</p> <p>Example: 1. Violation noted, no disciplinary action warranted. 2. That the accused member be reprimanded. 3. That the accused member be suspended for .... days (not to exceed 5 days).</p> <p>Findings UNFOUNDED</p> <p>No disciplinary action warranted.</p>			
DATE INITIATED (DATE COMPLAINT WAS RECEIVED FOR INVESTIGATION)		DATE COMPLETED (DATE OF THIS REPORT)	ELAPSED TIME (TOTAL TIME, EXPRESSED IN DAYS)	
Investigator will initiate the Command Channel Review form by completing the Investigator's Section.		27 June 2005	27 July 2005	30
IF NECESSARY, USE AN 8½ x 11" SHEET OF WHITE PAPER TO CONTINUE ANY ITEM.				

**ATTACHMENTS:**

- 1) Complaint Against Department Member**
- 2) To-From/Commander Jackson**
- 3) To-From/Sgt. Stubbe**
- 4) To-From/ADS Debra Kirby**
- 5) To-From/Sgt. Mann**
- 6) Letter to Complainant**
- 7) Domestic Return Receipt/Certified Mail Receipt**
- 8) Data Warehouse Contact Information (page 1)**
- 9) Data Warehouse Contact Information (page 2)**
- 10) CR Investigation Checklist**